



PREVENTION, RISK AND DESIRE: STUDY ON NON-USE OF CONDOMS

Prevenção, risco e desejo: estudo acerca do não uso de preservativos

Prevención, riesgo y deseo: estudio sobre la no utilización de condones

Francisco Jander de Sousa Nogueira

Federal University of Piauí (Universidade Federal do Piauí - UFPI) - Parnaíba (PI) - Brazil

Andressa Kécia Menezes Saraiva

Maurício de Nassau Faculty (Faculdade Maurício de Nassau - UNINASSAU) - Fortaleza (CE) - Brazil

Maryane da Silva Ribeiro

Maurício de Nassau Faculty (Faculdade Maurício de Nassau - UNINASSAU) - Fortaleza (CE) - Brazil

Nayane Maciel de Freitas

Maurício de Nassau Faculty (Faculdade Maurício de Nassau - UNINASSAU) - Fortaleza (CE) - Brazil

Césario Rui Callou Filho

Maurício de Nassau Faculty (Faculdade Maurício de Nassau - UNINASSAU) - Fortaleza (CE) - Brazil

Caroline Antero Machado Mesquita

Maurício de Nassau Faculty (Faculdade Maurício de Nassau - UNINASSAU) - Fortaleza (CE) - Brazil

ABSTRACT

Objective: To outline the causes that led men and women not to use condoms at the last sexual intercourse with casual partners. **Methods:** This is a documentary study, composed of 10,175 users attended to at a Counseling and Testing Center (CTC) in a capital city of the Brazilian Northeast. Variables are marital status, sex and the reasons for non-use of condoms in sexual intercourses. Data on the retrospective period from 2012 to 2014, collected in 2015, was submitted to treatment, by means of descriptive statistics, and was quantitatively tabulated. **Results:** The reason for not using condoms with the last casual partner had a total of 1,372 occurrences, distributed as 984 (71.7%) in the male population and 388 (28.2%) in the female. The most prevalent reason in relation to the non-use of the condom is the dislike, presenting 442 (32.2%) occurrences in both sexes. The reason with less incidence is that the partner does not accept it, with 81 (20.8%) cases and only among women; 143 (23.3%) occurrences were found only among single men, under the effect of alcohol and drugs. **Conclusion:** The users of the Counseling and Testing Center investigated presented, as prevalent reason for the non-use of condoms during sexual intercourses the fact of “not liking it”, for both sexes, since men and women, regardless of marital status, have confirmed that they do not use the condom with a casual partner.

Descriptors: Condoms; Sexually Transmitted Diseases; Unified Health System.

RESUMO

Objetivo: Delinear as causas que levaram homens e mulheres a não fazerem uso do preservativo na última relação sexual com parceiros eventuais. **Métodos:** Trata-se de estudo documental, composto por 10.175 usuários atendidos em um Centro de Testagem e Aconselhamento – CTA em uma capital do nordeste do Brasil. As variáveis são: estado civil, sexo e motivos de não se utilizar preservativos nas práticas sexuais. Os dados referem-se ao período retrospectivo de 2012 a 2014, coletados em 2015, nos quais, posteriormente, realizou-se tratamento, através da estatística descritiva, tabulando-os quantitativamente. **Resultados:** O motivo de não utilizar preservativo com último parceiro eventual teve um total de 1.372 ocorrências, distribuídas em: 984 (71,7%) na população masculina e 388 (28,2%) na feminina. O motivo que prevalece em relação ao não uso do preservativo é o “não gostar”, apresentando 442 (32,2%) ocorrências em ambos os sexos. O motivo com menor incidência é que o parceiro não aceita, com 81 (20,8%) casos e apenas no sexo feminino; 143 (23,3%) ocorrências foram encontradas apenas em homens solteiros, sob efeito de álcool e drogas. **Conclusão:** Os usuários do Centro de Testagem e Aconselhamento investigado apresentaram como motivo prevalente para o não uso de preservativos durante as relações sexuais o fato de “não gostar”, para ambos os sexos, visto que homens e mulheres, independentemente do estado civil, confirmaram não usar o preservativo com parceiro eventual.

Descritores: Preservativos; Doenças Sexualmente Transmissíveis; Sistema Único de Saúde.



RESUMEN

Objetivo: Delinear las causas para la no utilización de condones de parte de hombres y mujeres en su última relación sexual con compañeros eventuales. **Métodos:** Se trata de un estudio documental con 10.175 usuarios asistidos en un Centro de Pruebas y Consejo (CPC) de una capital del noreste de Brasil. Las variables son: el estado civil, el sexo y los motivos para la no utilización de condones durante las prácticas sexuales. Se recogieron los datos en 2015 relativo al período retrospectivo entre 2012 y 2014 con los cuales a posteriori se realizó un tratamiento de estadística descriptiva con tabulación cuantitativa. **Resultados:** El motivo para la no utilización del condón con el último compañero eventual se ha dado en un total de 1.372 ocurrencias que fueron distribuidas en 984 (71,7%) para la población masculina y 388 (28,2%) para la femenina. El principal motivo para la no utilización del condón es el "no me gusta" con 442 (32,2%) casos de ambos los sexos. El motivo de menos incidencia es que el compañero no lo acepta en 81 (20,8%) de los casos y solamente en el sexo femenino; hubieron solamente 143 (23,3%) casos entre los hombres solteros bajo el efecto del alcohol y las drogas. **Conclusión:** Los usuarios del Centro de Prueba y Consejo investigado presentaron como principal motivo para la no utilización de condones durante las relaciones sexuales el hecho de "no les gustar" para ambos los sexos una vez que los hombres y las mujeres, independiente del estado civil, han confirmado que no utilizan el condón con el compañero eventual.

Descriptor: Condones; Enfermedades de Transmisión Sexual; Sistema Único de Salud.

INTRODUCTION

Sexually transmitted infections (STIs) of prevalently contagious character occur through sexual relations, originated by more than 30 etiological agents, among which are viruses, bacteria, fungi and protozoa⁽¹⁾.

STIs are included among the common public health issues throughout the world⁽²⁾. Nevertheless, the likelihood of increasing the risk of contamination by the AIDS virus is three-fold, many of these conditions being asymptomatic. More alarming, however, is the information that one million people get a sex-related disease each day⁽³⁾. There is a large number of people spontaneously seeking the rapid testing for AIDS, characterized by gender differences, with gaps between married women and heterosexual men⁽⁴⁾.

In view of the increasing onset of STIs in Brazil, efforts were made through actions of the National Program on Sexually Transmitted Diseases (*Programa Nacional de Doenças Sexualmente Transmissíveis - PN-DST*) against the Acquired Immunodeficiency Syndrome (AIDS), culminating in the strengthening of the care network and the creation of a Counseling and Testing Center (CTC)⁽⁵⁾. According to a research conducted in 2014, there are 515 CTCs distributed throughout the country. In the state of Ceará, there are 03 units, located in Fortaleza, Maracanaú and Sobral^(5,6).

The CTC is a health service that, in articulation with other services of the Brazilian Unified Health System (*Sistema Único de Saúde - SUS*), represents an important strategy in disease prevention. This is a referral service for serological testing (rapid HIV/AIDS, syphilis, and hepatitis B and C tests), counseling and distribution of condoms free of charge^(6,7).

Among the most effective measures to control and prevent STIs, the best one is encouraging the correct and frequent use of condoms during sexual intercourse⁽⁸⁾, since a study⁽⁹⁾ conducted in Fortaleza, Ceará, describes that there is a limitation to this method, and its use is dependent on the partner. Another study shows that, in a marital relationship, safe sex and disease prevention are not related to condom use, but to confidence, partnership, fidelity, dialogue, the existing companionship shared by the couple and the quality of sex life, releasing from the use of condom^(9,10).

The reasons related to culture and confidence, from the perspective of non-use of condom and non-involvement of the partner in the treatment are characterized as obstacles to the control of STIs. It is also stated the need for a preventive work and health promotion actions to minimize this problem in the population⁽¹¹⁾. Faced with this situation, the population in general must be included in educational campaigns, in order to become aware of both the importance of periodic examinations and the use of condoms⁽¹²⁾.

It can be seen that the rapid testing service for sexually-related infections presents relevant strategies as regards health promotion, given its role of identifying and advising exposed individuals and thereby strengthening the discussion on the various situations of vulnerability⁽¹³⁾.

Therefore, the present study aims to outline the causes that lead men and women not to use condoms at the last sexual intercourse with casual partners.

METHODS

This is a descriptive, cross-sectional, documentary and retrospective study, with a quantitative approach, conducted at the Counseling and Testing Center (CTC) in Fortaleza, Ceará, Brazil, located at the Carlos Ribeiro Health Unit, a Primary Health Care Unit comprised in the I Regional Secretariat, which provides care to the public in response to spontaneous demand and/or medical referral.

The CTC of Fortaleza performs screening tests for STI (HIV, VDRL and hepatitis B and C), from Monday to Friday, from 8 a.m. to 12 noon and from 2 p.m. to 4 p.m. The service provided is confidential, with pre- and post-test counseling sessions, offering emotional support and clarification of doubts on all issues related to the investigated diseases, as well as providing all users that use the service with male and female condoms.

The study population consisted of records of data regarding the 10,175 male and female users seen at the CTC who did not use condom with an eventual partner and performed serological testing at the CTC – Fortaleza. The variables that correspond to the data evaluated are related to the marital status, sex and reasons for using, or not, the condom in sexual practices.

The data refers to the retrospective period from July 2012 to July 2014, collected from April to June 2015 and retrieved from the CTC Information System mentioned above. The database corresponds to a national STD/AIDS archive standardized by the Ministry of Health (MoH). Thus, interpretation and description of the data was performed through descriptive statistics. After being collected, data was tabulated quantitatively, organized in tables and discussed according to the relevant literature.

This study was approved by the Ethics Committee of São José Hospital for Infectious Diseases (HSJ), under Approval no. 963.805/2015.

RESULTS

The results of this study refer to the data of the notification form, which contains questions standardized by the Ministry of Health. At each visit to the service, the user answers once more to the form, that is, the same user can have more than one form because each entry to the sector requires that it be filled out again, and it is also allowed to tick more than one alternative in response to a variable. In result, the general follow-up of the CTC users' profile and the type of notification may show some divergence in numbers and percentages between the fast screening and the quantitative of users.

A total of 10,175 tests in the period evaluated were requested, among which 793 were reactive, with 579 cases in the male public, 214 serologies for HIV, 30 for hepatitis B, 18 for hepatitis C and 317 for VDRL. In the female public, the following results were found in 214 positive tests: 75 presented HIV serology, 10 for hepatitis B, 8 for hepatitis C and 121 for VDRL. Thus, it is observed that, regardless of sex, serologies for HIV and VDRL are the most incident, with the highest number of cases prevailing in the male population.

Tables I and II show the reason for not using condoms with the last casual partner in relation to sex and marital status, with a total of 1,372 occurrences, distributed in 984 occurrences in the male population and 388 in the female population, in which only the reasons with the highest occurrence number were described.

It is also observed that, regardless of sex and marital status, the predominant reason for non-use of the condom with the last casual partner is "dislike", with 442 occurrences in both sexes; and the reason with less incidence is that the partner does not accept it, with 81 occurrences, only reported by the female participants.

Regarding the non-use of condoms by male individuals, Table I shows "dislikes" as a dominant factor in: 38.5% of self-reportedly married users, 26.9% in users who declared themselves unmarried, 35.7% among the separated, 75% among the widowers and 42.3% among men who did not report their marital status.

As regards the other variables shown in Table I, there is the reason "sexual desire/not enough time" in evidence in separated (33.3%), unmarried (28.9%) and married (21.7%) individuals. On the other hand, being "under the influence of alcohol and drugs" is accentuated in the group of unmarried (23.3%), separated (16.6%) individuals, and those who did not report marital status (27.1%).

Among women, according to data on non-use of condoms in Table II, the "dislike" factor is evidenced with the highest percentage among widows (75%), followed by 47% of those who did not report their marital status and 35.1% of self-declared singles.

The "partner does not accept it" appears as the motive in 32.1% of the separated, 21.7% of married and 20.3% of single women. As for the variable "trusting the partner", in both the single and separated groups, it was reported by 25%, and by 20.9% of the married women. On the justification "sexual desire/not enough time" it was found in 28.5% of separated, 25% of widows, 24.1% of women who declared themselves married, and 19.4% of single women (Table II).

Table I - Characterization of the users according to sex, marital status and reason for non-use of the condom of the Counseling and Testing Center (CTC). Fortaleza, Ceará, 2015.

<i>Reason for not using a condom</i>		
Sex: MALE		
Marital Status: MARRIED		
Reason	n*	%
Dislike	103	38.5
It was not available at the moment	55	20.5
Under the influence of alcohol and drugs	51	19.1
Sexual desire/not enough time	58	21.7
Total	267	100.0
Marital Status: SINGLE		
Dislike	165	26.9
It was not available at the moment	127	20.7
Under the influence of alcohol and drugs	143	23.3
Sexual desire/not enough time	177	28.9
Total	612	100.0
Marital Status: DIVORCED		
Dislike	15	35.7
It was not available at the moment	6	14.2
Under the influence of alcohol and drugs	7	16.6
Sexual desire/not enough time	14	33.3
Total	42	100.0
Marital Status: WIDOWED		
Dislike	3	75.0
It was not available at the moment	1	25.0
Under the influence of alcohol and drugs	0	00.0
Sexual desire/not enough time	0	00.0
Total	4	100.0
Marital Status: NOT INFORMED		
Dislike	25	42.3
It was not available at the moment	9	15.2
Under the influence of alcohol and drugs	16	27.1
Sexual desire/not enough time	9	15.2
Total	59	100.0

* n = Number of occurrences by reason

Table II - Description of the users according to sex, marital status and reason for non-use of the condom of the Counseling and Testing Center (CTC). Fortaleza, Ceará, 2015.

<i>Reason for not using a condom</i>		
Sex: FEMALE		
Marital Status: MARRIED		
Reason	n*	%
Dislike	41	33.0
Partner does not accept	27	21.7
Trusting the partner	26	20.9
Sexual desire/not enough time	30	24.1
Total	124	100.0
Marital Status: SINGLE		
Dislike	76	35.1
Partner does not accept	44	20.3
Trusting the partner	54	25.0
Sexual desire/not enough time	42	19.4
Total	216	100.0
Marital Status: DIVORCED		
Dislike	4	14.2
Partner does not accept	9	32.1
Trusting the partner	7	25.0
Sexual desire/not enough time	8	28.5
Total	28	100.0
Marital Status: WIDOWED		
Dislike	2	75.0
Partner does not accept	0	00.0
Trusting the partner	0	00.0
Sexual desire/not enough time	1	25.0
Total	3	100.0
Marital Status: NOT INFORMED		
Dislike	8	47.0
Partner does not accept	1	5.8
Trusting the partner	5	29.4
Sexual desire/not enough time	3	17.6
Total	17	100.0

* n = Number of occurrences by reason

DISCUSSION

The data analyzed in the present study refers to the quantitative phase of information addressing the reason for not using a condom in the last relationship with a casual partner, carried out between 2012 and 2014. The first phase of the research had an approach focused on the general profile of CTC users. Thus, a total sample was analyzed in order to identify the epidemiological profile of the data, realizing the need to investigate why people do not use condoms in their sexual relations, especially in those where the partner is casual. One should note that the CTC - Fortaleza represents the SUS Reference Center for IST counseling and serological testing. The results of the survey are predominant in the population of Fortaleza that performed tests in the unit by spontaneous demand or by medical referral.

By means of standardized secondary data from the CTC Information System, it was possible to learn of the reasons that permeate the sexual practice susceptible to health conditions in men and women who sought the CTC - Fortaleza. It is noticeable that the search for health services is still limited and late. Men and women in the sexually active age group, with a high degree of vulnerability, seek the health service irregularly to perform serological testing, routine blood tests, cervical cancer screening, breast and, rarely, prostate examinations, corroborating findings of another study⁽¹⁴⁾.

In the present study, the largest number of CTC users is composed of men, possibly because they represent the population most exposed to risk, disagreeing with data from the Ministry of Health, which shows that the male population tends to seek less the health services and, thus, contribute to increasing the vulnerability of health conditions⁽¹⁵⁾.

In this perspective, it is noted that men only seek health services when they have some form of health condition that compromises their biopsychosocial integrity, requiring actions aimed at prevention in this vulnerable group, emphasizing the use of preventive measures and stressing the importance of periodic examinations, as well as the correct and complete treatment of some disease, already highlighted in a study of 2014 showing that such situation is probably a reflection of the low attention paid to health policies directed at the male clientele⁽¹⁵⁾. Control and prevention measures focused on vulnerability may contribute to the minimization of individual and social factors⁽¹⁶⁾.

In addition to the difficulty in integrating this public with the health service, it is observed, in the findings of the present study, that the prevalent reason for not using condoms during sexual intercourse is “dislike”, excluding the exclusivity of the male population, since both men and women, regardless of marital status, confirmed not using condoms during sexual intercourse with a casual partner.

Self-reportedly single men have a characteristic motive: they do not use condoms when they use alcohol associated with drugs, denoting the fragility of this public and corroborating a study carried out in 2015, in which the authors presented as the most frequent risk behavior the unprotected sex among young students due to the use of chemical substances⁽¹⁷⁾.

Nevertheless, there are still women who adopt unprotected sexual practices, and most are married. This group presents difficulties in negotiating the use of condoms with their partners during the relationship⁽¹⁸⁾.

In a study on sexuality, carried out in 2013 with adolescents, they recognized that the main reason for not always using condoms was “not having condoms at hand” whenever necessary, agreeing with the reason “sexual desire/not enough time” evidenced in the findings of the present research, being a relevant variable among single men, characterizing a careless behavior towards their quality of life. Such behavior puts this population at risk, since a single sexual intercourse results in contamination and subsequent transmissions, taking into account a probable majority of casual partners⁽¹⁹⁾.

With regard to the non-use of condom in the female clientele in the current research, it is important to highlight the involvement of the confidence on the partner, an issue also described in a study of 2004, which reports an important aspect for future interventions in the community health area⁽²⁰⁾, referring to the need for a change in the behavior of men and women regarding prevention. For this, a change in sexual practices and behaviors is essential⁽¹⁴⁾. Thus, the actions should strengthen measures of sex education in a protected manner⁽²¹⁾.

In the female population, the female condom can be referred to as an ally, as it has many advantages, since it can be used up to eight hours before the sexual act, allowing women to have greater autonomy in the decision for safe sexual relations. In this perspective, the variable “partner does not accept it”, can be negotiated so that the woman can have a greater autonomy under the use of the condom method. Also according to the same study, health professionals need to emphasize the importance of preventive measures, since these users often seek the health service only when they present some symptoms⁽¹⁴⁾.

Conversely, another study shows that, even though the female condom is an alternative for women to practice prevention, since they would have control over its use, the high cost, which is 21 times more expensive than that of the male condom, makes it a method of prevention inaccessible to those with lower purchasing power. The Ministry of Health still does not contemplate the free distribution of the female condom throughout the public network. As for its production, according to the Department of STIs, AIDS and viral hepatitis, there is only one major manufacturer of condoms worldwide, from which Brazil acquires 80% of its production⁽²²⁾.

Such variables outline the behavior of men and women in relation to the non-use of condoms during sexual relations, justifying the increasing number of cases of STIs, admitting other causes for not using condoms during sexual intercourse. However, it becomes explicit that the lack of information on how to use it and the reason for using the condom during sex should be more widespread, as justified by a survey conducted in 2004, which shows that a majority of the youth demonstrated not understanding the steps to effective use of condoms. The need for continuous sexual health education in the general population is perceived⁽²³⁾.

The present study corroborates a research conducted in 2014 that sensitizes managers and health professionals about STI-related issues and asks them to develop strategic educational actions for improvements in the quality of care for the cases and in disease prevention and control⁽²³⁾, given that “information” is a relevant factor in the informative and educational logistics of the programs intended to combat the STIs. Based on that study, the perspective of the work of public management and health professionals must confront the weaknesses of the epidemiological situation, interacting with social institutions (schools, neighborhood centers, residents’ associations, religious groups, among others), aiming at rendering the actions for prevention and combat of STIs more and more concrete and efficient, increasing the access to the different social groups of the population.

Health promotion strategies that strengthen counseling on condom use during sexual intercourse become an important device to combat STIs. Furthermore, based on the fact that sexual relations are beyond the traditional practice, specialized services should prioritize the deconstruction of stereotypes and the problematization of notions of exposure, vulnerability and guilty from a broad focus on the users that seek the service. Thus, allowing them to elaborate with autonomy and accountability for their sexuality, as well as to delineate self-care strategies in their itinerary in sexual relations⁽²⁴⁾.

The present research shows data on an increasing number of cases of sexually transmitted infections in men and women in a young age group, citing, among the reasons for such increase, the cultural, social and educational issues that can be

addressed in order to minimize the risks of the said health conditions. These data point to the importance of effective counseling methodology for health promotion, especially when addressing gender issues, affective/sexual relationships and social factors related to sexual behavior and practice in services for care and prevention of STD/AIDS, seeking to involve the users in the different public health programs and services.

The numbers should raise the attention of public health and health services, noting the need to include the population in the process of empowerment and also invest in knowledge and awareness of the importance of prevention, diagnosis and treatment in the control of these infections, through the use of condoms during sexual practice.

As regards the limitation of the present study, it refers to the number of tests, since the patient can go to the service and perform several testings. Moreover, in some answers, one can choose more than one item, which implies that the general quantitative data of people who sought the service and the answers may present differences, hindering the interpretation of data and, consequently, presenting a number not so accurate for the actual number of CTC users analyzed.

Finally, the current study will serve as a basis for further research to make the subject more visible and work with greater magnitude, suggesting the need for intensification of actions directed especially for adolescents and young people, considering the evolution of STI indicators.

CONCLUSION

The investigated users of the Counseling and Testing Center showed that the predominant reason for non-use of condoms during sexual intercourse was the fact that they did not like it, excluding the exclusivity of the male population, since both men and women, regardless of marital status, confirmed not using condoms during sexual intercourse with a casual partner. However, it proved to be a characteristic reason of male sex, unmarried and under the influence of alcohol associated with drugs.

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Mailing address:

Francisco Jander de Sousa Nogueira
Universidade Federal do Piauí - UFPI
Campus Ministro Reis Veloso
Av. São Sebastião, 2819
Bairro: São Benedito
CEP: 64202-020 - Parnaíba - PI - Brasil
E-mail: jander.sociosaude@gmail.com